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To:	USPTO Examiner L. Wells Art. Unit 1617	From:	Claire Wygand for Klaus Schweitzer Phone: (704) 365-4881 Fax: (704) 365-4851
Fax:	(703) 872-9306	Pages:	3 pages total: Fax Cover sheet (1 page) Limited Recognition Form (1 page) Power of Attorney and Correspondence Address Indication Form (1 page)
Phone:	(703) 305-0389	Date:	November 24, 2003
Re:	Application No. 10/659,361; Filed 9/11/2003 Our Ref.: 97L213C1 Power of Attorney	CC:	

Dear Examiner Wells,

Attached is a Power of Attorney for the above case with a copy of the Limited Recognition under 37 C.F.R. § 10.9(b) for Klaus Schweitzer.

Respectfully submitted,

Claire Wygand

Claire Wygand

Paralegal

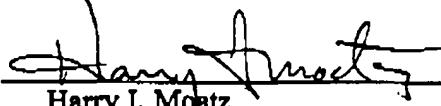
**BEFORE THE OFFICE OF ENROLLMENT AND DISCIPLINE
UNITED STATES PATENT AND TRADEMARK OFFICE**

LIMITED RECOGNITION UNDER 37 CFR § 10.9(b)

Klaus Schweitzer is hereby given limited recognition under 37 CFR § 10.9(b) as an employee of ProPat, L.L.C. to prepare and prosecute U.S. patent applications wherein the applicant is the client of ProPat, L.L.C., and the attorney of record in the applications is Mr. Gregory Clements (Reg. No. 30,713). This limited recognition shall expire on the date appearing below, or when whichever of the following events first occurs prior to the date appearing below: (i) Klaus Schweitzer ceases to lawfully reside in the United States, (ii) Klaus Schweitzer's employment with ProPat, L.L.C. ceases or is terminated, or (iii) Klaus Schweitzer ceases to remain or reside in the United States on an E2 visa.

This document constitutes proof of such recognition. The original of this document is on file in the Office of Enrollment and Discipline of the U.S. Patent and Trademark Office.

Expires: November 6, 2004



Harry I. Moatz
Director of Enrollment and Discipline

PTO/SB/81 (09-03)

Approved for use through 11/30/2006. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/659,361
Filing Date	Sep. 11, 2003
First Named Inventor	Manfred BOHN
Title	Antipsoriatic Nail Polish
Art Unit	1617
Examiner Name	A. Berman
Attorney Docket Number	97/L213 C1

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I hereby appoint:

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OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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Firm or Individual Name:

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Name: Karl Theodor KRAMERSignature: Karl Theodor KRAMERDate: November 14, 2003Telephone: ++49-6103 72323

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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***** Transmit Conf. Report *****

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